ATTACH RECENT PHOTOGRAPH REVISED APRIL 2012



State of West Virginia Office of Miners' Health, Safety and Training

#7 Players Club Drive – Suite 2 Charleston, West Virginia 25311-1626 www.wyminesafety.org

Date	
APPROVED BY:	
DATE APPROVED:	

Number ____

Complete Sections 1-4

REQUEST FOR CERTIFICATION CHANGE / UPGRADE SURFACE MINE FOREMAN

Section 1					
Name					
La Address	st	First		Middle	
Stı	reet / P. O. Box	City	State	Zip	
Home Telephone Nui	mber:		Date of Birth	//	
			Month Day Year		
SSN (Last four Digits))		WV Coal Miners certificate number		
CURRENT CLASSIFICA	ATION		Assistant Mine Foreman	Certification Number	
Total surface experie (Show dates of employr	enceYears ment in Section 2 below)		Working pit experience	Months	
Are you a graduate o	of an accredited mining engine	ering school?			
Name of school			Degree	Yes (attach copy)	No
Section 2		ce. c ti	· · · · · · · · · · · · · · · · · · ·	eded use separate sheet of pap	er
		Surface Coal	Mining Experience		
Company and Mine I	Name Address	Years Experience		nt Duties	
1)	Haire Address	Experience		to / /	
-,			Month/Day/Year	Month/Day/Year	
2)			/ / Month/Day/Year	to/_/ Month/Day/Year	
3)				to/	
4)			•	Month/Day/Year to / /	
- ,				Month/Day/Year	
Date			Signature of Applicant		
Section 3					
<u> </u>					
State of					
Subscribed	and sworn before me, a Nota	ry Public this	day of	, 20	
My commis	sion expires				
(Notary Seal)			Claustina (China)	II	
			Signature of Notary Pub	lic	

22A-2-21(d) Whoever knowingly makes any false statement, representation, or certification in any application, record, report, plan or other document filed or required to be maintained pursuant to this law or any other or decision issued under this law shall be guilty of a misdemeanor, and, upon conviction thereof, shall be fined not more than \$5,000.00 or imprisoned in the county jail not more than six months, or both fined and imprisoned.



Section 4 - To be completed by company official verifying mining experience

This is to certify that mining experience w			years and/or s were on or at a working section.	
Coal Company / Min	e		Signature of Company Official	
Employment Dates: experience	to		Printed Name/Title of C	Co. Official certifying
	Month/ Day/ Year	Month/ Day/ Year	Telephone Number	
State of			relephone Number	
County of				
	Subscribed and sworn b	pefore me, a Notary Public t	his day of	, 20
	My commission expires			
(Notary Seal)				
			Signature of Notary Public	
This is to certify that mining experience w	: vith this company, of which	has ha month	nd years and/or ns were on or at a working section.	months of surface coal
Coal Company / Min	e		Signature of Company Official	
Employment Dates: experience	to		Printed Name/Title of C	Co. Official certifying
	Month/ Day/ Year	Month/ Day/ Year		
State of			Telephone Number	
County of				
	Subscribed and sworn b	pefore me, a Notary Public t	his day of	, 20
	My commission expires			
(Notary Seal)				
, , ,			Signature of Notary Public	
This is to certify that mining experience w	thith this company, of which	has ha month	nd years and/or is were on or at a working section.	
Coal Company / Min	e		Signature of Company Official	
	to		Printed Name/Title of C	Co. Official certifying
experience	Month/ Day/ Year	Month/ Day/ Year	Telephone Number	
State of			receptione (value)	
County of				
	Subscribed and sworn b	petore me, a Notary Public	this day of	, 20
	My commission expires			
(Notary Seal)			Signature of Notary Public	